Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPEO			OTHER THAN R SMALL ENTITY	
TC	OTAL CLAIMS	;	6				]	RATE	FEE	٦	RATE	FEE
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FEE	<del>                                     </del>	OR		<del>                                     </del>
TC	OTAL CHARGE	ABLE CLAIMS	/ mi	nus 20=	*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 mi	inus 3 =	* /	*		X43=	<del>                                     </del>	1	X86=	<u> </u>
ΜL	JLTIPLE DEPE	NDENT CLAIM PI	RESENT						<del> </del>	OR		
* If	f the difference	e in column 1 is	less than z	ero. enter	-"0" in (	column 2	' <b>I</b>	+145=	1200	OR	+290=	
		•				JUIGHT L		TOTAL	385	OR	TOTAL	
		(Column 1)	WENDER	MENDED - PART II (Column 2)				SMALL	ENTITY	OR	OTHER SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
لــا	FIRST PRESE	ENTATION OF MU	JLTIPLE DEP	PENDENT	CLAIM			+145=	<u> </u>	1	+290=	
							L	TOTAL		OR OR	TOTAL	
		(Column 1)		(Colum	nn 2)	(Column 3)	Α	DDIT. FEE		Un /	ADDIT. FEE <b>L</b>	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	EST BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT O				CLAIM		-	i				
							L	+145= TOTAL		OR	+290= TOTAL	
		· <del>···</del> · · · · · · · · · · · · · · · · ·				_,	Al	DDIT. FEE		OR A	ADDIT. FEEL	
		(Column 1) (Column CLAIMS HIGHES		ST	(Column 3)		· ·	-551	ſ	<del></del>		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<u>§</u>	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	<u> </u>	Minus	***		=		X43=		OR	X86=	
ユ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										<del></del>	
* If	the entry in colur	mn 1 is less than the	e entry in colur	mn 2, write "	'0" in colı	umn 3.	L	+145=		OR L	+290=	
**  {	f the "Highest Num If the "Highest Nun	mber Previously Pai mber Previously Pai	aid For" IN THIS aid For" IN THIS	S SPACE is It S SPACE is I	less than less than	n 20, enter "20." n 3. enter "3."	~~	TOTAL DOTAL	<del></del>		TOTAL DOTT. FEE	
T	he *Highest Num!	ber Previously Paid	For" (Total or	Independen	t) is the l	highest number	r found	d in the appr	opriate box	in colu	mn 1.	